

Rev. 12/94 F

State of Washington Application for a Water Right Glon OFFICE

For Ecology Use Fee Paid 10 Date 11

Please follow the attached instructions to avoid unnecessary delays.

Name YAKIMA CO FIRE DIS		uniz/Amon, oa		SYSTEM
	T. #6 (GLEEC	Po Fo) Home Tel:(
Mailing Address 320 OLD WACH	ES HWY	Work Tel:(50	9)966 -	5060
City YAKIMA State V	YA Zip+4 <u>9890</u>	+ 9037 FAX:6	09)966	4620
Section 2. CONTACT - PER ☑ Same as above	SON TO CAL	L ABOUT THE	APPLICA	TION
Name CHIEF JIM KON	42	Home Tel: (50	9)966 -	4969
Mailing Address		Work Tel:(×
Mailing AddressState	Zip+4	+FAX:(_	·)	- "
Relationship to applicant				
Section 3. STATEMENT OF The applicant requests a permit to use not □ cubic feet per second) from a □ surfa				
purpose(s) of <u>FACILITY HEAT</u> description of the place of use. (<u>See instacts SHEE</u> SEE ATTACHEO SHEE Estimate a maximum annual quantity to I	tructions.) NOTE:	A tax parcel number or	a plat numl	per is not sufficient.
Check if the water use is propose needed: From// to Section 4. WATER SOURCE	o/		Mast -	that the water will be to the
If SURFACE WATER		If GROUNDWATER		MEGION OFFICE
	A permit is desired for well(s). I SucTION I RETURN			
Name the water source and indicate if s lake, etc. If unnamed, write "unnamed "unnamed stream," etc.: Number of diversions:	stream, spring,	1 SucTION		_well(s).
lake, etc. If unnamed, write "unnamed	stream, spring, I spring,"	1 SucTION	2,	
lake, etc. If unnamed, write "unnamed "unnamed stream," etc.: Number of diversions: Source flows into (name of body of war	stream, spring, I spring," ter):	SucTION RETURN Size & depth of well(s) 18" DIA X 2	2,	
lake, etc. If unnamed, write "unnamed "unnamed stream," etc.: Number of diversions:	stream, spring, I spring, ter): distances in feet fr mately 25	Size & depth of well(s) 18" DIA X 14, WA. 98 Tom the point of divers	2. 2.5 FT design of with the second of the s	hdrawal to the
lake, etc. If unnamed, write "unnamed "unnamed stream," etc.: Number of diversions: Source flows into (name of body of war LOCATION 9/ No. GLEEK Enter the north-south and east-west nearest section corner: APPROXIMAL	stream, spring, I spring, ter): distances in feet fr mately 25	Size & depth of well(s) 18" DIA X 14, WA. 98 Tom the point of divers	2. 2.5 FT 1. 2.5 FT 1. 3.0 P 3.0 P 3.0 P 3.0 P 4.0 P 3.1 P 4.0 P	hdrawal to the 60 FT EAST N RISE. W.M. ource is platted, complete
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Appl. No.:

Α.	Name of system, if named:
FERM	Briefly describe your proposed water system. (See instructions.) WELLS ARE TO PROVIDE A SOURCE AND RETURN FOR 3 NATER TO AIR HEAT PUMPS TO PROVIDE HEATING AND COOLING OR THE NEW GLEED FIRE STATION. EACH HEAT PUMP WILL EQUIRE A MAXIMUM OF 7 GAL/MIN TO OPERATE. WATER WILL EDRAWN FROM THE UPSTREAM WELL AND WILL BE RETURNED THE AQUIFER IN THE DOWN STREAM WELL,
C.	Do you already have any water rights or claims associated with this property or system? YES NO PROVIDE DOCUMENTATION.
	ction 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION ompleted for all domestic/public supply uses.) DNA.
A.	Number of "connections" requested: Type of connection
В.	Are you within the area of an approved water system? (Homes, Apartment, Recreational, etc.) If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Con	aplete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan.
	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION omplete for all irrigation and agriculture uses.) QMA.
A.	Total number of acres to be irrigated:
B.	List total number of acres for other specified agricultural uses:
	UseAcres
	UseAcres
C.	Total number of acres to be covered by this application:
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).
	 Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no:
E.	Farm uses: Stockwater - Total # of animals Animal type (If dairy cattle, see below) Dairy - # Milking # Non-milking
	MAN 3 TO DESCRIPTION OF THE PARTY OF THE PAR
	APPLICATION

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

□ YES & NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

FROM YAKIMA, GO WEST ON HWY-12 APPROXIMATELY 5 MILES TO GLEED. TURN RT. (NORTH) ON MCCORMICK ROAD THEN LEFT LWEST) OM MAPLE WAY. GO I BLOCK TO "Y". TAKE A RIGHT AT "Y" ONTO NORTH GLEED ROAD. YY BLOCK CROSS RR TRACKS AND PROPERTY IS IMMEDIATELY ON THE RIGHT (EAST) BEFORE THE TAVERN.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

SEE ATTACHED MAP

Section 11. PROPERTY OWNERSHIP

Α.	Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name(s) and owner(s):	X YES □ NC address(es) of the
В.	Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:	A YES □ NO
and the e	tify that the information above is true and accurate to the best of my knowledge. It to process my application, I grant staff from the Department of Ecology access to monitoring purposes. Even though I may have been assisted in the preparation of employees of the Department of Ecology, all responsibility for the accuracy of the interpretation.	the site for inspection the above application by
R	Next R. Sutation (CAPTAIN)	
Fo. Appl	And R Sulphon (CAPTAIN) R YCFD # 6 GLEED F. D. $11/3/95$ icant (or authorized representative) Date	

Spring.	

Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.

Examination fee was not enclosed	RETURN TO CASHIER,
Section number(s)is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return you(date).	ur application by

Ecology staff______ Date_____

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

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